



STERILISATION PROCEDURES

How we protect your health at every appointment

The safety of every appointment is not an organisational detail: it is an integral part of care. Every instrument that comes into contact with your mouth follows a rigorous, documented process, identical at both practices. Here we explain how it works, because we believe you have the right to know.

THE INSTRUMENT PATHWAY

1 Decontamination

Immediately after use, instruments are immersed in a disinfectant solution with bactericidal, fungicidal and virucidal action. This step reduces the microbial load and also protects whoever handles the instruments in the following stages.

2 Cleaning

Cleaning is carried out with an ultrasonic bath or a thermal washer-disinfector. It is the most critical stage of the whole cycle: no sterilisation can be effective on an instrument that has not been perfectly cleaned of every organic residue.

3 Rinsing and drying

Instruments are rinsed and dried completely. Any residual moisture would compromise both the penetration of the steam and the long-term integrity of the sterile pouch.

4 Pouching and traceability

Each instrument or kit is sealed in a pouch with a colour-change indicator and traced with the cycle date and the sterility expiry. The pouch is opened in front of you, at the time of your appointment.

5 Autoclave sterilisation

Saturated-steam cycle in a class B autoclave, the highest-performing class provided for by the EN 13060 standard: the only one able to sterilise hollow, porous and pouched instruments as well.

6 Storage

Sterile pouches are kept in closed cabinets, protected from dust and moisture, and used within the stated expiry. Beyond that date, instruments re-enter the cycle and are re-sterilised.

THE CHECKS WE CARRY OUT

Periodic autoclave checks

An autoclave that works is not an autoclave that is assumed to work. Each check has its own frequency, and is recorded:

- ✓ Vacuum test — every day. Checks the vacuum seal of the chamber: rules out air leaks that would prevent the steam from reaching the instruments.
- ✓ Helix test — every day. A test for hollow loads: it confirms that the steam reaches the inside of instruments with narrow channels, such as the handpieces we sterilise every day.
- ✓ Bowie-Dick test — every month. A general check of the rapid, uniform penetration of the steam and of the absence of residual air pockets in the chamber.
- ✓ Spore test — every month. The most rigorous check: it verifies the actual inactivation of highly resistant bacterial spores.
- ✓ Legionella check — every year. Water sampling in line with the national guidelines for the prevention and control of legionellosis.

Surfaces, dental unit and single-use

Safety is not only about instruments. Between one patient and the next:

- ✓ Every pouch carries a chemical indicator that changes colour only once the process parameters have actually been reached.
- ✓ The work surfaces and the controls of the dental unit are disinfected with products holding official registration.
- ✓ Surfaces in direct contact are protected by single-use barriers, replaced at every appointment.
- ✓ The handpieces are lubricated, pouched and sterilised in the autoclave after every use.
- ✓ The waterlines of the dental unit follow a dedicated protocol for biofilm control.
- ✓ Needles, gloves, saliva ejectors, cups and bibs are strictly single-use.
- ✓ Infectious clinical waste is disposed of by an authorised company, with documented traceability.
- ✓ The equipment follows a documented maintenance plan, with periodic servicing by qualified technicians.

Sanitation and maintenance plans

Both practices have formalised a Sanitation Plan and a Maintenance Plan that define, for every room and piece of equipment, the procedures, products and intervention frequencies, with documented recording of the activities carried out. The protocols comply with the applicable regulations — including Legislative Decree 81/2008, EU Reg. 2017/745 and the technical standards EN 13060 and ISO 15883 — and may be consulted on request at the practice.